

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09834332

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TC	TAL CLAIMO		(Column 1)		(Column 2)		T	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			24					RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA		ŀ	BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	24 minus 20=		* 4			X\$ 9=	36	OR	X\$18=	
IND	EPENDENT CL	5 mir	5 minus 3 =		2		X40=	80	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" <u>i</u> n c	olumn 2	L	TOTAL	471	OR	TOTAL	
CLAIMS AS AMENDED					PART II				-(]	OTHER	THAN
		(Column 1)		(Column 2) (Column 3)				SMALL ENTITY			SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***				X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JUITPLE DEF	ENDEN	CLAIM			+135=		OR	+270=	
							L	TOTAL DDIT. FEE			TOTAL	
	(Column 1) (Column 2) (Column 3)									1	ADDIT. FEE	
<u></u>		CLAIMS		HIGH	IEST		lΓ	1	ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	╽┟	X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		IJ ┞	405			070	
							L	+135=		OR	+270=	
							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=]	X40=			X80=	
┖	FIRST PRESENTATION OF MULTIPLE DEPENDENT						 	740=		OR	700=	
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
		nber Previously Pa					er four	nd in the app	ropriate box	k in co	lumn 1.	